

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MICHIGAN

2015 FEB -6 P 3:28

IN RE:

City of Detroit U.S. BANKRUPTCY COURT CASE NO: 13-53846

E.D. MICHIGAN-DETROIT CHAPTER:

JUDGE: Hon. Steven Rhodes

Debtor.

Application for Administrative Expense Claim  
FOR/TO

NOW COMES Debtor(s), and brings this motion for/to Application for Administrative Expense Claim. In support of Debtor(s)'s motion, Debtor states the following [state the facts]:

1. On or about November 4, 2013, I filed <sup>the attached</sup> a Federal EEOC complaint (Charge No. 471-2014-00163) against the City of Detroit for gender discrimination, retaliation, and the continued intentional infliction of emotional distress.
2. Debtor requests One million Dollars (\$1,000,000.00) in relief; a claim filed previously on at least two separate occasions with the bankruptcy court (see Claim 2603).
3. Debtor requests this Court to consider Debtor's Motion for to Application for Administrative Expense Claim and afford Debtor what further relief this Court deems equitable

and just. A copy of a proposed Order is attached hereto.

Respectfully submitted,

Dated: 02-06-15

(Debtor's Signature)

Print Name: SHERELL STANLEY  
(313) 570-2012

(Co-Debtor's Signature)

Print Name: \_\_\_\_\_

## CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To: Agency(ies) Charge No(s)

 FEPA  
 EEOC

471-2014-00163

## Michigan Department Of Civil Rights

and EEOC

State or local Agency, if any

Name (Indicate Mr., Ms., Mrs.)

Ms. Sherell S. Stanley

Home Phone (Incl. Area Code)

Date of Birth

(313) 570-2012

Street Address

City, State and ZIP Code

P.O. Box 321032, Detroit, MI 48232

Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others (If more than two, list under PARTICULARS below.)

Name	No Employees Members	Phone No (Include Area Code)
CITY OF DETROIT, DETROIT POLICE DEPARTMENT	500 or More	(313) 596-5600

Street Address

City, State and ZIP Code

11450 Warwick, Detroit, MI 48228

Name	No Employees Members	Phone No (Include Area Code)
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Street Address

City, State and ZIP Code

DISCRIMINATION BASED ON (Check appropriate box(es))	DATE(S) DISCRIMINATION TOOK PLACE
<input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN	Earliest    09    Latest
<input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION	10-24-2012    10-08-2013
<input type="checkbox"/> OTHER (Specify)	<input checked="" type="checkbox"/> CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s))  
 I began working for the above named employer on 6/24/96. I am currently employed as a Lieutenant at the 6<sup>th</sup> Precinct, Platoon One/Midnight Shift.

Since the fall of 2012, through November 2013, I have been retaliated against and subject to different terms and conditions of employment as compared to male supervisors due to my sex (female), both in violation of Title VII.

Specifically, I have been required to procure authorization in advance of working prescheduled overtime; my request to split my 2013 summer furlough was denied twice, supposedly due to overlapping with another sergeants,' which was not true; I was assigned more officers and responsibilities with less supervisory personnel than Platoons Two or Three, placing me at a disadvantage in completing assignments in a timely manner and subjecting me to disciplinary action (scheduled for six (6) disciplinary Trial Boards); I have been required to combine my monthly mobilization report and SOC sheet, following a specific format, not required of any male supervisor to procure approval of those particular monthly reports; I have been required to include an extra cover

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct

NOTARY - When necessary for State and Local Agency Requirements

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE  
(month day year) 11-07-2013

HEATHER DEHART

Notary Public, Wayne County, MI

Acting In \_\_\_\_\_ County

My Commission Expires September 22, 2014

11-07-13

Date

Charging Party Signature

**CHARGE OF DISCRIMINATION**

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Charge Presented To:

Agency(ies) Charge No(s):

 FEPA EEOC

471-2014-00163

**Michigan Department Of Civil Rights**

State or local Agency, if any

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s))

memorandum in addition to the cover-memos already included within my package of Quarterly Equipment Inspection reports not mandated per Department policy or of any male supervisor; my authority as lieutenant has been constantly undermined by the Inspector. Lastly, I was retaliated against by being disciplined for complaining of inequities due to my gender. Males were not subject to the same treatment under the above mentioned same/similar circumstances.

I have been subjected to different terms/conditions of employment due to my sex (female) and in retaliation for filing previous charges of discrimination and for filing internal complaints of sex discrimination, in violation of Title VII of the Civil Rights Act of 1964, as amended.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

11-07-13



Date

Charging Party Signature

## NOTARY - When necessary for State and Local Agency Requirements



I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

## SIGNATURE OF COMPLAINANT



11-07-13  
SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE  
(month, day, year)  
11-7-2013

HEATHER DEHART  
Notary Public, Wayne County, MI

Acting in ~~Wayne County~~  
My Commission Expires September 22, 2014

**FILED (I)**

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MICHIGAN  
2015 FEB -6 P 328

IN RE: *City of Detroit*  
Debtor.

U.S. BANKRUPTCY COURT  
E.D. MICHIGAN-DETROIT

CASE NO: 13-53846  
CHAPTER: \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I hereby certify that on 2/6/15 (date of mailing), I served copies as follows:

1. Document(s) served:

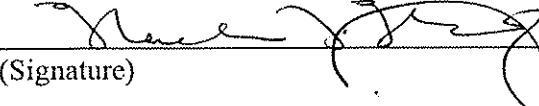
*Application for Administrative  
Expense Claim*

2. Served upon [name and address of each person served]:

*Mr. Bruce Bennett, Heather Lennox, and Jones Day  
Law Firm  
555 S. Flower St.  
50<sup>TH</sup> Floor  
Los Angeles, CA 90071*

3. By First Class Mail.

Dated: 02-06-15

  
(Signature)

Print Name: SHERELL STANLEY